SUPPLEMENTAL "LARGE CONTRIBUTION" REPORT BY A CANDIDATE'S COMMITTEE (\$1,000 CONTRIBUTIONS OR MORE)

State Form 48492 (8-97)

Indiana Election Commission (IC 3-9-5-20) Approved by State Board of Accounts 1997

INSTRUCTIONS: All candidates are required to file this report. Please type or print legibly IN BLACK INK all information on this form. For assistance in completing this form, see instructions on the reverse side.

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1. Full name of candidate (Include any nickname) Check if this is a new name			2. Committee telephone number (317) 844-8076			
	ress (address where all campaign finance correspondence is received) 24 WILSON DRIVE	_ ch	neck if this is a new addres	S	tel page Car	
4. City, state, ZIP code CARMEL IN 46032			5. Party affiliation or if independent REPUBLICAN			
6. Office sought (Include district number, if any. Not required for exploratory committee CARMEL			7. County of residence			
8. Reporting pe From:	H-12-2003, 10 Through: 4-22-2		, 19 <u></u>	ongelel s'settiminoo a	TEM ZEnter to	
For classifi	mittee receive any "large contributions" since the close of the last cation, enter INDV for individual; PAC for political a ill entries which are not one of the above categori	ction co			or organization;	
STEATED IN	CONTRIBUTOR'S FULL NAME AND OCCUPATION FULL MAILING ADDRESS (street, number, city, state, ZIP code)	TYPE	OF CONTRIBUTION OTHER RECEIPT	COLUMN A AMOUNT OF CONTRIBUTION	DATE RECEIVED RECEIVED BY	
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WARNING: Any information contained in this report may not be copied for sale or used for any commercial purpose. (IC 3-9-4-5) A person who knowingly files a fraudulent report commits a Class D Felony. (IC 3-14-1-13) A person who fails to file a complete or accurate report as required by the Indiana Campaign Finance Law commits a Class B Misdemeanor (IC 3-14-1-14) and may be subject to civil penalties (IC 3-9-4-16, 3-9-4-17, 3-9-4-18).